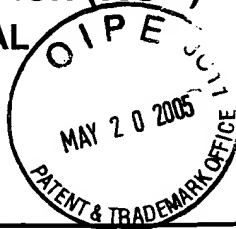


3, RCE
+

**REQUEST
FOR
CONTINUED EXAMINATION (RCE)
TRANSMITTAL**

Address to:
Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450



Application Number	09/883,366
Filing Date	June 19, 2001
First Named Inventor	ISHIO
Group Art Unit	2811
Examiner Name	J. Im
Attorney Docket Number	1035-330

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application. Request for continued Examination (RCE) practice under 37 C.F.R. § 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

1. **Submission required under 37 C.F.R. § 1.114.**

- a. ☒ Previously submitted (Note: Any previously filed unentered amendments will be entered unless applicant instructs otherwise. If applicant does not wish to have previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s).
- i. ☒ Consider the amendment(s)/reply under 37 C.F.R. § 1.116 previously filed on March 21, 2005
- ii. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____
- iii. ☐ Other _____
- b. ☐ Enclosed
- i. ☐ Amendment/Reply
- ii. ☐ Affidavit(s)/Declaration(s)
- iii. ☐ Information Disclosure Statement (IDS)
- iv. ☐ Other _____

05/26/2005 EFLORES 00000050 09883366

01 FC:1801

790.00 OP

2. **Miscellaneous**

- a. ☐ Suspension of action on the above-identified application is requested under 35 C.F.R. § 1.103(c) for a period of _____ months. (Period of suspension shall not exceed 3 months; Fee under 37 C.F.R. § 1.17(i) required)
- b. ☐ Other _____

3. **Fees** The RCE fee under 37 C.F.R. § 1.17(e) is required by 37 C.F.R. § 1.114 when the RCE is filed.

- a. ☐ Applicant claims "small entity" status.
- b. ☒ Fees are attached as calculated below:
- i. ☒ RCE fee required under 37 C.F.R. § 1.17(e) \$790.00 (1801)/\$395.00 (2801) \$ 790.00
- ii. ☐ Petition is made to extend the due date _____ months (less _____ months previously paid) \$
- iii. ☐ Other _____ \$
- c. ☐ Check in the amount of \$ _____ enclosed.
- d. ☒ Payment by credit card (credit card payment form attached) in the amount of \$ 790.00
- e. ☒ The Director is hereby authorized to charge any deficiency in the fee(s) filed or which should have been filed herewith (or with any paper hereafter filed in this application by this firm), to Deposit Account No. 14-1140

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Name (Print Type)	Michael J. Shea	Registration No. (Attorney/Agent)	34,725
Signature	<i>Michael J. Shea</i>	Date	May 20, 2005

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop RCE, Commissioner For Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or facsimile transmitted to the U.S. Patent and Trademark Office on:

Name (Print Type)		Date	
Signature		Date	